EXEMPTION – Have you excluded from this report any other assets, "uneamed" income, or liabilities of a spouse or dependent child because they meet all three tests for Yes No	TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded Yes No	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES" THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE	D. Did you, your spouse, or your dependent child have any reportable Yes No J. Did you receive compensation of more than \$5,000 from a Yes No liability (more than \$10,000) at any point during the reporting period?	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/iRA distributions) of \$200 or more during the reporting period? F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar yes No year up through the date of filing?	A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? or b. Receive more than \$200 in unearned income from any reportable asset during the reporting period? Yes No E. Did you hold any reportable positions during the reporting the reporting period or in the current calendar year up through the date of filing? Yes No Yes	PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	New Officer or Employee Staff Filer Type (If Applicable): Employing Office: Shared Principal Assistant Period Covered: January 1, 2017 A \$200 penalty shall be assessed against any individual who files more than 30 days late.	New Member of or Candidate for State: U.S. House of Representatives District: Candidates – Date of Election: Candidates – Date of Election:	Name: William LEINER BA Daytime Telephone: OFFICE OF THE CLERK ITS HOUSE OF REPRESENTATIVES	UNITED STATES HOUSE OF REPRESENTATIVES FORM B FINANCIAL DISCLOSURE STATEMENT FOR New Members, Candidates, and New Employees LEGISLATIVE RESOURCE CENTER	
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: WILLIAM LEINER

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				2		Examples:			OD, list even to the property. The property. The property. The property is not public	oank and oth nterest-bean	all IRAs an k) plans) pro account that	ide complete not use only	dentify (a) each ass production of income a exceeding \$1,000 at the and (b) any other reports which generated more fincome during the year.	Assets a	
				P	ABC Hedge Fund X	Simon & Schuster	Mega Corp Stock		\$5,000, list every financial institution where there is more than \$1,000 in interest-bearing accounts. For rental and other real property held for investment, provide a complete address or description, e.g., "rental property," and a city and state. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); and any financial interest in, or income derived from, a federal retirement program, including the Thrift Savings Plan. If you have a privately-traded fund that is an Excepted Investment Fund, please check the "EIF" box. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or jointly held with anyone (JT), in the optional column on the far left. For a detailed discussion of Schedule A requirements, please refer to the instruction booklet.	For bank and other cash accounts, total the amount in all interest-bearing accounts. If the total is over	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use only ticker symbols).	Identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or source of income which generated more than \$200 in "unearned" income during the year.	Assets and/or Income Sources	BLOCK A
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			L						\$500,001-\$1,000,000	Ŧ	_	Column M is for assets held by your spouse or dependent shild in which you have no interest.	Indicate value of asset at dose of the reporting period. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold during the reporting period and is included only because it generated income, the value should be "None."	Value of Asset	₿
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					Partnership Income	Royalties			Other Type of Income (Specify: e.g., Partnership Income or Farm Income)			"None" if the asset generated no income during the reporting period.	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 529 accounts), you may check the "Tax-Deferred" column. Dividends, interest, and capital gains, even if relinvested, must be disclosed as income for assets held in trainble accounts. Check		ĺ
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						╄	_		Spouse/DC Income over \$1,000,000*	쏠	-		For assets for which you checked "Tax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts. Check "None" if no income was earned or generated. *Column XII is for assets held by your spouse or dependent child in which you have no interest.	Amount of Income	BLOCK D
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: WILLIAM LEINER

Page 3

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SCHEDULE C -- EARNED INCOME

Name: WILLIAM LEINER Page 5

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for

	1	Am	Amount
Source (include date of receipt for nonoraria)	Туре	Current Year to Filing	Preceding Year NIC
\downarrow	Honorarium	\$0	\$500
Examples: Civil War Roundtable (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	\$20,000 \$0 N/A	\$1,000 \$1,000 N/A
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SCHEDULE D - LIABILITIES

Name: WILLIAM LEINER

Page S of 7

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence exceeded \$10,000. liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period (unless you rent it out or are a Member), loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and *Column K is for liabilities held solely by your spouse or dependent child.

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			Men	Example		
			WELLS CANGO BANIC	First Bank of Wilmington, DE	Creditor	
			1986-000	5/98	Date Liability Incurred MO/YR	
		GWillya L Leiner	1986-min Cheda Ord	Mortgage on Rental Property, Dover, DE	Type of Liability	
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year. First-year candidates and new employees report positions held in the current calendar year and two previous years.

		_	
		CHAIR PENJON	Position
		Copion fehranch's found Committee, 41 N. 8 25 50; Coping On 18037	Name of Organization

SCHEDULE F - AGREEMENTS

Name: WILLIAM LE INER

Page 6 of 7

employer. Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former

N/A - NONE	Date	Parties to Agreement
		N/A - NONE

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information listed on Schedule C.

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Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
V/A - Nove	